Filing Company: Farmers Insurance Company, Inc. State Tracking Number: AR-PC-07-025846

Company Tracking Number: FAR0740-205580

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: F-AR-2007-PA-F

Project Name/Number: New Endorsement Cost Benefits for New Cars - J6469, 1st ed/A-06-904

## Filing at a Glance

Company: Farmers Insurance Company, Inc.

Product Name: F-AR-2007-PA-F SERFF Tr Num: FARM-125267121 State: Arkansas

TOI: 19.0 Personal Auto SERFF Status: Closed State Tr Num: AR-PC-07-025846

Sub-TOI: 19.0001 Private Passenger Auto Co Tr Num: FAR0740-205580 State Status:

(PPA)

Filing Type: Form Co Status: Reviewer(s): Alexa Grissom, Betty

Montesi, Brittany Yielding

Authors: Vivian Alarcon, Jeanette Disposition Date: 08/27/2007

Campion, Gayane Rupchian, Mina Villegas, Chris SalvaCruz, Edmond

Balaian

Date Submitted: 08/21/2007 Disposition Status: Approved

Effective Date Requested (New): 12/15/2007 Effective Date (New): 12/15/2007

Effective Date Requested (Renewal): 12/15/2007 Effective Date (Renewal):

### **General Information**

Project Name: New Endorsement Cost Benefits for New Cars - J6469, Status of Filing in Domicile: Not Filed

1st ed

Project Number: A-06-904 Domicile Status Comments:

Reference Organization: Reference Number:

Reference Title: Advisory Org. Circular:

Filing Status Changed: 08/27/2007

State Status Changed: 08/21/2007 Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

We respectfully submit for your review and approval a new optional endorsement, New Endorsement Replacement Cost Benefits for New Cars J6469 1st Edition. This endorsement, when selected, will amend the damage to the car limits of liability portion of the policy. This coverage expansion will allow our customers who have purchased new vehicles to select the use of original equipment manufacturer parts at their discretion in the repair of their vehicles in the event of loss.

We propose that this filing be applicable to all polices effective on or after December 15, 2007.

Filing Company: Farmers Insurance Company, Inc. State Tracking Number: AR-PC-07-025846

Company Tracking Number: FAR0740-205580

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: F-AR-2007-PA-F

Project Name/Number: New Endorsement Cost Benefits for New Cars - J6469, 1st ed/A-06-904

### **Company and Contact**

### **Filing Contact Information**

Feliksa Barran, Manager - Business Feliksa\_Barran@farmersinsurance.com

Implementation

4700 Wilshire Blvd. (323) 932-3056 [Phone]

Los Angeles, CA 90010 () -[FAX]

**Filing Company Information** 

Farmers Insurance Company, Inc. CoCode: 21628 State of Domicile: Kansas

10850 Lowell Avenue Group Code: 212 Company Type:
Overland Park, KS 66210-1667 Group Name: State ID Number:

(323) 932-3056 ext. [Phone] FEIN Number: 48-0609012

-----

## **Filing Fees**

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No

Fee Explanation: \$50.00 is the required filing fee for company FICI. Fee will be mailed via DHL on 08-23-2007.

Per Company: No

CHECK NUMBER CHECK AMOUNT CHECK DATE

\$0.00

Filing Company: Farmers Insurance Company, Inc. State Tracking Number: AR-PC-07-025846

Company Tracking Number: FAR0740-205580

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: F-AR-2007-PA-F

Project Name/Number: New Endorsement Cost Benefits for New Cars - J6469, 1st ed/A-06-904

## **Correspondence Summary**

### **Dispositions**

Status Created By Created On Date Submitted

Approved Alexa Grissom 08/27/2007 08/27/2007

**Objection Letters and Response Letters** 

Objection Letters Response Letters

Status Created By Created On Date Submitted Responded By Created On Date Submitted

Pending Alexa Grissom 08/23/2007 08/23/2007 Mina Villegas 08/23/2007 08/23/2007

Industry Response

### **Amendments**

Item	Schedule	Created By	Created On	Date Submitted
Corrected company	Supporting Document	Mina Villegas	08/21/2007	08/21/2007
name				

Filing Company: Farmers Insurance Company, Inc. State Tracking Number: AR-PC-07-025846

Company Tracking Number: FAR0740-205580

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: F-AR-2007-PA-F

Project Name/Number: New Endorsement Cost Benefits for New Cars - J6469, 1st ed/A-06-904

## **Disposition**

Disposition Date: 08/27/2007

Effective Date (New): 12/15/2007

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

Filing Company: Farmers Insurance Company, Inc. State Tracking Number: AR-PC-07-025846

Company Tracking Number: FAR0740-205580

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: F-AR-2007-PA-F

Project Name/Number: New Endorsement Cost Benefits for New Cars - J6469, 1st ed/A-06-904

Item Type	Item Name	Item Status	<b>Public Access</b>
Supporting Document	Uniform Transmittal Document-Property	&Approved	Yes
	Casualty		
Supporting Document	Cover memo	Approved	Yes
Supporting Document	Corrected company name	Approved	Yes
Supporting Document	Corrected P&C transmittal & J6469	Approved	Yes
Form	New Endt Replacement Cost Benefits fo	r Approved	Yes

Filing Company: Farmers Insurance Company, Inc. State Tracking Number: AR-PC-07-025846

Company Tracking Number: FAR0740-205580

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: F-AR-2007-PA-F

Project Name/Number: New Endorsement Cost Benefits for New Cars - J6469, 1st ed/A-06-904

### **Objection Letter**

Objection Letter Status Pending Industry Response

Objection Letter Date 08/23/2007 Submitted Date 08/23/2007

Respond By Date Dear Feliksa Barran,

This will acknowledge receipt of the captioned filing.

Please submit a new transmittal with the correct company name.

Please feel free to contact me if you have questions.

Sincerely,

Alexa Grissom

## **Response Letter**

Response Letter Status Submitted to State

Response Letter Date 08/23/2007 Submitted Date 08/23/2007

Dear Alexa Grissom,

### **Comments:**

### Response 1

Comments: Attached is corrected P & C transmittal per your request.

Also, there was a typo on Item 2 of the second paragraph on Endorsement J6469. We are correcting the typo to change "your" to "you".

We apologize for the inconvenience this may have caused.

### **Changed Items:**

### **Supporting Document Schedule Item Changes**

Satisfied -Name: Corrected P&C transmittal & J6469

Filing Company: Farmers Insurance Company, Inc. State Tracking Number: AR-PC-07-025846

Company Tracking Number: FAR0740-205580

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: F-AR-2007-PA-F

Project Name/Number: New Endorsement Cost Benefits for New Cars - J6469, 1st ed/A-06-904

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,

Chris SalvaCruz, Edmond Balaian, Gayane Rupchian, Jeanette Campion, Mina Villegas, Vivian Alarcon

Filing Company: Farmers Insurance Company, Inc. State Tracking Number: AR-PC-07-025846

Company Tracking Number: FAR0740-205580

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: F-AR-2007-PA-F

Project Name/Number: New Endorsement Cost Benefits for New Cars - J6469, 1st ed/A-06-904

**Amendment Letter** 

Amendment Date:

Submitted Date: 08/21/2007

**Comments:**Dear Reviewer

I would like to correct the company name from Farmers Insurance Exchange to Farmers Insurance Company, Inc. for this filing. I have attached the corrected cover memo. I apologize for the inconvenience this may have caused.

**Changed Items:** 

**Supporting Document Schedule Item Changes:** 

User Added -Name: Corrected company name

Comment:

Cover memo.pdf

Filing Company: Farmers Insurance Company, Inc. State Tracking Number: AR-PC-07-025846

Company Tracking Number: FAR0740-205580

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: F-AR-2007-PA-F

Project Name/Number: New Endorsement Cost Benefits for New Cars - J6469, 1st ed/A-06-904

### Form Schedule

Review	Form Name	Form #	Edition	Form Type Action	Action Specific	Readability	Attachment
Status			Date		Data		
Approved	New Endt	J6469, 1s	st 4-07	Endorseme New		47.70	J6469, 1st
	Replacement	ed		nt/Amendm			ed.pdf
	Cost Benefits for			ent/Conditi			
	New Cars			ons			

# REPLACEMENT COST BENEFITS FOR NEW CARS

This coverage applies only to the vehicle(s) for which this endorsement is listed on the Declarations page. For an additional premium, it is agreed that coverage for the designated vehicle(s) is amended as follows:

Under **PART IV DAMAGE TO YOUR CAR, Limits of Liability,** is deleted and replaced with the following:

This coverage is applicable only within two years of the date this endorsement is applied, or within 24,000 miles of usage, whichever occurs first. During this time, our limits of liability for **loss** to your **insured car** shall not exceed:

- 1. The amount necessary to repair or replace the property or parts with new property or parts made for or by the original equipment manufacturer, selected at your direction, when available;
- 2. The amount necessary to repair or replace the property or parts with new property or parts made by or for non-original equipment manufacturer, selected at your direction; or
- 3. \$500 for a **utility trailer** not owned by you, or a **family member**.

Our liability does not include loss consisting of perceived reduction of market value after the damaged property has been restored to its pre-loss condition.

This coverage does not apply to total losses.

This coverage applies to your **insured car** provided that:

- 1. you or a **family member** are the original owner of the **insured car**;
- 2. the **insured car** is added within 90 days of the date your or a **family member** take delivery;
- 3. The **insured car** was one of the following at the time of purchase, as determined by the vehicle manufacturer:
  - a. the current vehicle model year;
  - b. a future vehicle model year;
  - c. the vehicle model year immediately preceding the current vehicle model year; and
- 4. The **insured car** was purchased in and designed for use in the United States.

This endorsement is part of your policy. It supersedes and controls anything to the contrary. It is otherwise subject to all other terms of the policy.

93-6469 1ST EDITION 4-07 J6469101

Filing Company: Farmers Insurance Company, Inc. State Tracking Number: AR-PC-07-025846

Company Tracking Number: FAR0740-205580

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: F-AR-2007-PA-F

Project Name/Number: New Endorsement Cost Benefits for New Cars - J6469, 1st ed/A-06-904

### **Rate Information**

Rate data does NOT apply to filing.

SERFF Tracking Number: FARM-125267121 Arkansas State:

AR-PC-07-025846 Filing Company: Farmers Insurance Company, Inc. State Tracking Number:

Company Tracking Number: FAR0740-205580

19.0 Personal Auto TOI: Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: F-AR-2007-PA-F

New Endorsement Cost Benefits for New Cars - J6469, 1st ed/A-06-904 Project Name/Number:

## **Supporting Document Schedules**

**Review Status:** 

Uniform Transmittal Document-Satisfied -Name: Approved 08/27/2007

**Property & Casualty** 

**Comments:** 

Attachment:

P&C transmittal.pdf

**Review Status:** 

Cover memo Satisfied -Name: Approved 08/27/2007

**Comments:** Attachment:

Cover memo.pdf

**Review Status:** 

Satisfied -Name: Corrected company name Approved 08/27/2007

Comments: Attachment:

Cover memo.pdf

**Review Status:** 

Corrected P&C transmittal & J6469 Approved Satisfied -Name: 08/27/2007

Comments: Attachments:

P&C transmittal.pdf

Revised J6469, 1st ed.pdf

## **Property & Casualty Transmittal Document**

1.	2. In:	2. Insurance Department Use only								
1. Reserved for insurance			e the filing is received:							
b. Anal										
				position:						
		•	e of disposition of the filing:							
				date o		1111111	9.			
		e. En		ew Bus						
					Business					
		f. Sta	te Fil	ing #:			-			
		g. SE	RFF	Filing #	:					
				Codes						
		•	-							
3.	Group Name								Group NAIC #	
	Farmers Insurance Group of Co	ompanies							0212	
4.	Company Name(s)		Don	nicile	NAIC#		FEIN#		State #	
	Farmers Insurance Exchange		CA		21652		95-2575893			
ŀ										
5.	Company Tracking Number			EADO	740-2055	on				
٥.	Company Tracking Number			1 7110	7-40-2033	oo				
<u>'</u>										
	tact Info of Filer(s) or Corporate				-free numb	er]				
Con 6.	Name and address	Title		Telep	hone #s		FAX #		e-mail	
	Name and address Jonathon Miller	Title Contract	S	Telep			FAX # 3-930-4725		e-mail	
	Name and address  Jonathon Miller 4700 Wilshire Blvd, A1-3	Title	S	Telep	hone #s				e-mail	
	Name and address Jonathon Miller	Title Contract	S	Telep	hone #s				e-mail	
	Name and address  Jonathon Miller 4700 Wilshire Blvd, A1-3	Title Contract	S	<b>Telep</b> 323-93	hone #s 30-4214	32:			e-mail	
6.	Name and address  Jonathon Miller 4700 Wilshire Blvd, A1-3 Los Angeles, CA 90010	Title Contract	S	<b>Telep</b> 323-93	hone #s 30-4214	32:			e-mail	
	Name and address  Jonathon Miller 4700 Wilshire Blvd, A1-3	Title Contract	S	<b>Telep</b> 323-93	hone #s	32:			e-mail	
6.	Name and address  Jonathon Miller 4700 Wilshire Blvd, A1-3 Los Angeles, CA 90010	Title Contract Manager	S	<b>Telep</b> 323-93	hone #s 30-4214	32:			e-mail	
7. 8.	Name and address  Jonathon Miller 4700 Wilshire Blvd, A1-3 Los Angeles, CA 90010  Signature of authorized filer	Title Contract Manager	S	Telep 323-93	hone #s 30-4214 Willegas	32. an	3-930-4725		e-mail	
7. 8. Filii 9.	Name and address  Jonathon Miller 4700 Wilshire Blvd, A1-3 Los Angeles, CA 90010  Signature of authorized filer  Please print name of authorized filer  Type of Insurance (TOI)	Title Contract Manager  ed filer  nstruction	s for Pe	Mina \ descrip	hone #s 30-4214  Willegas tions of th	32:	3-930-4725 fields)		e-mail	
7. 8. Filii 9.	Name and address  Jonathon Miller 4700 Wilshire Blvd, A1-3 Los Angeles, CA 90010  Signature of authorized filer  Please print name of authorized  ing information (see General I  Type of Insurance (TOI)  Sub-Type of Insurance (Sul	Title Contract Manager  ed filer  nstruction	s for Pe	Mina \ descrip rsonal / vate Pa	hone #s 30-4214 Willegas vitions of th	32:	3-930-4725 fields)		e-mail	
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## **Property & Casualty Transmittal Document—**

20. This filing transmittal is part of Company Tracking # FAR0740-205580

21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

## Please see filing memorandum

22. Filing Fees (Filer must provide check # and fee amount if applicable)
[If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #: Not available yet

Amount: \$50.00

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

\*\*\*Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

PC TD-1 pg 2 of 2



4700 Wilshire Blvd Los Angeles, CA 90010 Bus number: (323) 930-4214 Fax number: (323) 930-4725 www.farmersinsurance.com

August 20, 2007

Honorable Julie Benafield Bowman Commissioner of Insurance Arkansas Insurance Department 1200 West 3<sup>rd</sup> Street Little Rock, Arkansas 72201-1904

### SUBJECT: Replacement Cost Benefits for New Cars J6469 Endorsement

Company Name	Reference #	NAIC #	Group #
Farmers Insurance Exchange	FAR0740-205580	21628	0212

#### Dear Commissioner:

We respectfully submit for your review and approval a new optional endorsement, New Endorsement Replacement Cost Benefits for New Cars J6469 1<sup>st</sup> Edition. This endorsement, when selected, will amend the damage to the car limits of liability portion of the policy. This coverage expansion will allow our customers who have purchased new vehicles to select the use of original equipment manufacturer parts at their discretion in the repair of their vehicles in the event of loss.

We propose that this filing be applicable to all polices effective on or after December 15, 2007.

Should you have any questions, please feel free to contact Jonathon Miller at (323) 930-4214.

Thank you for your cooperation in this matter.

Very truly yours, FARMERS INSURANCE COMPANY, INC

By: Jonathon L. Miller, JD, GCA Contract Manager

Personal Lines/Underwriting/Contracts



4700 Wilshire Blvd Los Angeles, CA 90010 Bus number: (323) 930-4214 Fax number: (323) 930-4725 www.farmersinsurance.com

August 20, 2007

Honorable Julie Benafield Bowman Commissioner of Insurance Arkansas Insurance Department 1200 West 3<sup>rd</sup> Street Little Rock, Arkansas 72201-1904

### SUBJECT: Replacement Cost Benefits for New Cars J6469 Endorsement

Company Name	Reference #	NAIC#	Group #
Farmers Insurance Company, Inc.	FAR0740-205580	21628	0212

#### Dear Commissioner:

We respectfully submit for your review and approval a new optional endorsement, New Endorsement Replacement Cost Benefits for New Cars J6469 1<sup>st</sup> Edition. This endorsement, when selected, will amend the damage to the car limits of liability portion of the policy. This coverage expansion will allow our customers who have purchased new vehicles to select the use of original equipment manufacturer parts at their discretion in the repair of their vehicles in the event of loss.

We propose that this filing be applicable to all polices effective on or after December 15, 2007.

Should you have any questions, please feel free to contact Jonathon Miller at (323) 930-4214.

Thank you for your cooperation in this matter.

Very truly yours, FARMERS INSURANCE COMPANY, INC

By: Jonathon L. Miller, JD, GCA Contract Manager

Personal Lines/Underwriting/Contracts

## **Property & Casualty Transmittal Document**

1.	2. In:	2. Insurance Department Use only									
			te the	e the filing is received:							
	b. Anal										
				position:							
					e of disposition of the filing:						
				date o			<u>-</u>				
			N	ew Bus	iness						
					Business						
				ing #:							
		g. SE	RFF	Filing #	:						
		h. Sul	oject	Codes							
3.	Group Name	<u> </u>			, 				Group NAIC #		
J.	Farmers Insurance Group of Co	ompanies							0212		
4.	Company Name(s)		Dom	nicile	NAIC #		FEIN#		State #		
4.	Farmers Insurance Company,	Inc	CA		21628		48-0609012				
	r anners insurance company,	1110.	<u>OA</u>		21020		40-0003012				
5. Company Tracking Number		FAR0740-205580									
Con	tact Info of Filer(s) or Corporate	Officer(s)	[inc	lude toll	-free numb	er]					
Con 6.	Name and address	Officer(s) Title		Telep	hone #s		FAX#		e-mail		
	Name and address Jonathon Miller	Title Contracts	S	Telep			<b>FAX #</b> 3-930-4725		e-mail		
	Name and address  Jonathon Miller 4700 Wilshire Blvd, A1-3	Title	S	Telep	hone #s				e-mail		
	Name and address Jonathon Miller	Title Contracts	S	Telep	hone #s				e-mail		
	Name and address  Jonathon Miller 4700 Wilshire Blvd, A1-3	Title Contracts	S	Telep	hone #s				e-mail		
6.	Name and address Jonathon Miller 4700 Wilshire Blvd, A1-3 Los Angeles, CA 90010	Title Contracts	S	<b>Telep</b> 323-93	hone #s 30-4214	32:			e-mail		
7.	Name and address  Jonathon Miller 4700 Wilshire Blvd, A1-3 Los Angeles, CA 90010  Signature of authorized filer	Title Contracts Manager	S	<b>Telep</b> 323-93	hone #s 30-4214	32:			e-mail		
6.	Name and address Jonathon Miller 4700 Wilshire Blvd, A1-3 Los Angeles, CA 90010	Title Contracts Manager	S	<b>Telep</b> 323-93	hone #s 30-4214	32:			e-mail		
7. 8.	Name and address  Jonathon Miller 4700 Wilshire Blvd, A1-3 Los Angeles, CA 90010  Signature of authorized filer  Please print name of authorizeng information (see General Interpretation (see General	Title Contracts Manager	s for	Telep 323-93  Wina \ descrip	hone #s 30-4214 Willegas tions of th	32.	3-930-4725		e-mail		
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## **Property & Casualty Transmittal Document—**

20.	This filing transmittal is part of Company Tracking #	FAR0740-205580
	inition in any transcription of a company in a coming "	1 7 11 107 10 200000

21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

## Please see filing memorandum

**22. Filing Fees** (Filer must provide check # and fee amount if applicable)
[If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #: Not available yet

Amount: \$50.00

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

\*\*\*Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

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# REPLACEMENT COST BENEFITS FOR NEW CARS

This coverage applies only to the vehicle(s) for which this endorsement is listed on the Declarations page. For an additional premium, it is agreed that coverage for the designated vehicle(s) is amended as follows:

Under **PART IV DAMAGE TO YOUR CAR, Limits of Liability,** is deleted and replaced with the following:

This coverage is applicable only within two years of the date this endorsement is applied, or within 24,000 miles of usage, whichever occurs first. During this time, our limits of liability for **loss** to your **insured car** shall not exceed:

- 1. The amount necessary to repair or replace the property or parts with new property or parts made for or by the original equipment manufacturer, selected at your direction, when available;
- 2. The amount necessary to repair or replace the property or parts with new property or parts made by or for non-original equipment manufacturer, selected at your direction; or
- 3. \$500 for a **utility trailer** not owned by you, or a **family member**.

Our liability does not include loss consisting of perceived reduction of market value after the damaged property has been restored to its pre-loss condition.

This coverage does not apply to total losses.

This coverage applies to your **insured car** provided that:

- 1. you or a **family member** are the original owner of the **insured car**,
- 2. the **insured car** is added within 90 days of the date you or a **family member** take delivery;
- 3. The **insured car** was one of the following at the time of purchase, as determined by the vehicle manufacturer:
  - a. the current vehicle model year;
  - b. a future vehicle model year;
  - c. the vehicle model year immediately preceding the current vehicle model year; and
- 4. The **insured car** was purchased in and designed for use in the United States.

This endorsement is part of your policy. It supersedes and controls anything to the contrary. It is otherwise subject to all other terms of the policy.

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